

**Voucher for Payment of
Annual Contributions
and Operating Statement**
Housing Assistance Payments Program
Supplemental Reporting Form

**US Department of Housing
and Urban Development**
Office of Public and Indian Housing

OMB Approval No. 2577-0169
(Exp. 03/31/2004)

Public reporting burden for this collection of information is estimated to average 1.50 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and you are not required to respond to, a collection of information unless that collection displays a valid OMB control number. Authority for this collection of information is the Housing and Community Development Act of 1987. Housing Agencies (HAs) required to maintain financial reports in accordance with accepted accounting standards to permit timely and effective audits. The financial records identify the amount of annual contributions that are received and disbursed by HAs. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality.

HA Number:		HA Name:		HA FYE:	
Submission Type:		<input type="checkbox"/> Original Submission	<input type="checkbox"/> Revised Submission	<input type="checkbox"/> Special Submission	

Housing Choice Voucher Program – Utilization and Administrative Fee and Expense Reporting			
Administrative Fee Reserve (Operating Reserves) Balance as of January 31, 2003 (01/31/03)			
Unit Months Leased:			
Litigation			
Mainstream 1 – Year			
Mainstream 5 – Year			
Homeownership			
Moving to Work			
All Other Vouchers			
Total Unit Months Leased			
New Homeowners (Identify the number of New Homeownership voucher issued for the specified month.)			
HAP Expenses: (Housing Assistance Payments to Landlords, Utility Reimbursement, FSS Escrow, Home Purchase Escrow) Exclude: Portability payments due from another Housing Authority.			
Litigation			
Mainstream 1 – Year			
Mainstream 5 – Year			
Homeownership			
Moving to Work			
All Other HAP Expenses			
Total HAP Expenses			
Admin Fee Earned:			
Admin Expenses: (Accts 4110, 4130, 4150, 4180, 7520, 7540, 4190, 4540, and 4510) Exclude: FSS Coordinator, Special Fee, Mobility Counseling, ROC costs, Preliminary Expenses, and Portability payments due from another Housing Authority.			
Audit: (Enter the audit cost for entire period. Do not breakdown by month)			
Hard to House:			
FSS Coordinator:			
LBP Test:			
LBP Risk Assessment:			
Mobility Counseling:			
Preliminary Fees: (New HA's Only)			
Housing Conversion Fees:			
ROC:			
Highest Fair Market Rent (FMR) for reporting quarter			
Other: (Brief Description)			
Comment:			
Name of HA Point of Contact:		POC Phone Number: Ext:	
Name of Authorized HA Official:		Date Submitted:	Official HA E-Mail Address